Substitute t	Substitute for form 1449/PTO				Complete if Known		
				Application Number	09/553,969		
INFO	RMATION DIS	CLOS	URE	Filing Date	April 21, 2000		
STAT	STATEMENT BY APPLICANT			First Named Inventor	WALLACE, DONALD G.		
				Art Unit	1611		
ļ ·	Use as many sheets as i	necessary)		Examiner Name	CHANNAVAJJALA, Lakshmi Sarada		
Sheet	1	of	2	Attorney Docket Number	017067-002040US		

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Examiner Initials*	No.1	Document Number  Number Kind Code <sup>2 (Fixtows)</sup>	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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	B1	EP	01414370	B1	04-04-2007	Baxter International Inc.			

Examiner Signature	Date Considered	
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

\*Applicant is unique citation designation number (postional. \*Applicant is unique citation designation is attached.

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					Application Number	09/553,969	
1	NFOF	RMATION DIS	SCLOS	URE	Filing Date	April 21, 2000	
8	TAT	EMENT BY A	PPLIC	ANT	First Named Inventor	WALLACE, DONALD G.	
					Art Unit	1611	
(Use as many sheets as necessary)					Examiner Name	CHANNAVAJJALA, Lakshmi Sarada	
Sh	eet	2	of	2	Attorney Docket Number	017067-002040US	

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Examiner Initials *	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
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